

| POSITION                  | INITIALS  | ID NO.     | DATE            |
|---------------------------|-----------|------------|-----------------|
| FEE DETERMINATION         |           |            |                 |
| O.I.P.E. CLASSIFIER       |           |            |                 |
| FORMALITY REVIEW          | <i>fa</i> | <i>720</i> | <i>12-10-01</i> |
| RESPONSE FORMALITY REVIEW |           |            |                 |

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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*20876*  
*12/10/01*